## PART B—ISSUE FEE TRANSMITTAL Complete and mail this form, together with applicatie fees, to: Box ISSUE FEE

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IM62/0316

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APPLIC	ATION NO	I .						
APPLICATION NO.		FILING DATE	TOTAL CL	_AIMS	EXAMINER AND GROUP AR	DATE MAILED		
09.	/091,157	06/09/98	004	cooley,	С	1723	03/16/00	
First Named Applicant	PURVEY,		35	USC 154(b)	term ext. =	0 Days	· ·	

INLE OF INVENTION CENTRIFUGAL SEPARATOR WITH WEIGHT THRUST BEARING

ATTY'S DOCKET NO.	CLASS-SUBCLASS	CLASS-SUBCLASS BATCH NO. APPLN. T		PE SMALL ENTITY		FEE DUE	DATE DUE	
1 52-348	494-049.0	)00 J7	7 UTIL	_IT	y NO	\$1210.00	06/16/00	
Use of PTO form(s) and Customer Number are recommended, but not required.    Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.    "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropiate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filling an assignment.  (A) NAME OF ASSIGNEE  Clacier Metal Company Limited  ENCE: (CITY & STATE OR COUNTRY)  Middlesex, England  Please check the appropriate assignee category indicated below (will not be printed on the patent)  individual corporation or other private group entity government					4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):  Issue Fee Advance Order - # of Copies  4b. The following fees or deficiency in these fees should be charged to:  DEPOSIT ACCOUNT NUMBER (ENCLOSE AN EXTRA COPY OF THIS FORM)  Issue Fee Advance Order - # of Copies  Advance Order - # of Copies			
The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.								
(Authorized Signafure) Michael J. Keenlan,	32,106	(Date 6/9	) /00	H 6	6/12/2000 SDUOM61	00000036 090	91157	
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